

Reaching Out to Low-Income Women to Prevent Breast and Cervical Cancer

Public Health Problem

In the United States, African American woman are more likely to die of breast cancer than women of any other racial or ethnic group. Cervical cancer death rates are more than twice the national average among African American women and are higher than average among Hispanic women. In the United States, more than 40,000 women will die of breast cancer, and more than 2,000 of them will be from Illinois. Currently, only about 9% of breast cancers in Illinois are detected at the earliest, most curable stages, and in 1998, Illinois was in the top 25% of states for women aged 50 or older who had not had a mammogram in the last 2 years.

Evidence That Prevention Works

Timely mammography screening could prevent approximately 15%–30% of all deaths from breast cancer among women over the age of 40. According to the American Cancer Society, between 1955 and 1992, the number of deaths from cervical cancer declined by 74%, and the main reason for that decline was the use of the Pap test to detect cervical cancer early.

Program Example

Supported by CDC, Reach Out is a broad-based Chicago-area collaboration that draws on the leadership of local churches to encourage low-income African American and Hispanic women to seek early breast and cervical cancer screening. Reach Out held focus groups of female members of seven African American and two Latino churches and learned that participants wanted relevant information about how breast and cervical cancer could affect them as individuals and as a community. Led by health educators in the community, each church used a standard education intervention in addition to other outreach methods such as incorporating health information and reminders about the importance of screening and early detection in Sunday sermons, developing support groups, and sponsoring health fairs.

Implications

Community-based programs like Reach Out that seek community input are more likely than other programs to be responsive to the needs and the culture of the community. This approach can extend lifesaving prevention programs and screening services across cultural divides to communities that would not likely be reached by traditional means.